		•••	1	Sharmon	<b></b>	SCHOOL LOCATION	<b>797</b>	
PATENT APPLICATION FEE DETERMINATION RECOR				04849304.				
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY OTHER THAN TYPE COR SMALL ENTITY			
14			RATE	FEE	1	RATE	FEE	
NUMBER RLED	MUMB	ER EXTRA	BASICFE	<b>₫</b> 55.00	OR	DASIC FEE	710.00	
/4_minus 20-	·d		X\$ 9=		OR	X\$18=	•	
4_minus 3=	7		X40=		08	X80=	•	
RESENT		1196-	-		A270a			
If the difference in column 1 is less than zero, enter "O" in column 2							•	
CLAIMS AS AMENDED - PART II OTHER THAN								
		(Column 3)	SMALL	ENTITY.	OR	SMALL E		
PREVI	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
Mires - 2	ථ	4.	XS 9-		OR	X\$10-		
Minus •••	4	• Ø	X40-	•	OR	X000-	• :	
REMAINING AFTER PREVIOUSLY PAID FOR EXTRA  Total / / Mirus - / = 1  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+270=		
					1	TOTAL		
Coh	mn 21	(Column 3)	ADDIT. FE	EL	10	ADDIT. FEE		
100	REST	7		ADDI	1		ADDI-	
PREV	OUBLY	EXTRA	RATE	TIONAL FEE		PATE	TIONAL	
Minus	20	.0	×s-		OR	X\$18=		
Minus •••	4		X40-		OR	X80-		
OCIPCE DEPENDEN	COM		+135-		OR	+270-		
					OR	TOTAL	1	
(Colt	mn 2)	(Column 3)	ADDIL PE	والمستديدة		MAN PER	abla	
MUI	IOUSLY	PRESENT EXTRA	RATE			RATE	ADDI- TIONAL FEE	
Minus	20	-0	XSO	1	1_	X\$18-		
Minus	4	• 0		<del>                                     </del>	1		2	
AMENDMENT PAID FOR  Total • / / Minus •• &				<del> </del>	1		2	
the entry in column 2	<b>17</b> in co	Amo 3.	+135-		OR			
** If the "Rightest Number Proviously Pald For" IN THUS SPACE is less than 20, enter "20." ***If the "Richtest Number Proviously Pald For" IN THUS SPACE is less than 2, enter "2."				Ē	JOR	ADDIT, FEE	0	
eld For (Fotal or Indepen	dent) is the	highest numbe	r found in the r	eppropriate be	m in o	olumen 1.		
	SFILED - PART (Column 1)  /   MANAGER FILED  /  MINUS 20  A _ minus 20  A _ minus 3 o  RESENT   MENDED - PAR (Column 1)  Minus    Minus    Minus	Column 2)  Hinus  (Column 2)  Hinus  (Column 2)  Highest  Hinus  (Column 2)  Hinus	SFILED - PART I (Column 1) (Column 2)  /	SFILED - PART I (Column 1) (Column 2)  FATE  MUMBER FILED MUMBER EXTRA  / L minus 20	TOTAL  ADDITIFUE DEPENDENT CLAIM  (Column 2)  (Column 3)  (Column	TOTAL  ANDERSE DEPENDENT GLAIM  Column 2)  Column 3)  Column 2)  Column 3)  Column 4  Column 3)  Co	SFILED - PART I  (Column 1) (Column 2)  (Column 2) (Column 3)  MINUS	